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Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
WESTERN DISTRICT OF VIRGINIA	_	
Case number (if known)	_ Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this is an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pa	t 1: Identify Yourself		
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full name		
	Write the name that is on your government-issued picture identification (for example, your driver's license or passport). Bring your picture identification to your meeting with the trustee.	William First name Joseph Middle name Ramsey Last name and Suffix (Sr., Jr., II, III)	Tracy First name Michelle Middle name Ramsey Last name and Suffix (Sr., Jr., II, III)
2.	All other names you have used in the last 8 years Include your married or maiden names.		
3.	Only the last 4 digits of your Social Security number or federal Individual Taxpayer Identification number (ITIN)	xxx-xx-1211	xxx-xx-9023

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Det	otor 2 Tracy Michelle Ra	msey	Case number (if known)
		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4.	Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years	■ I have not used any business name or EINs.	■ I have not used any business name or EINs.
	Include trade names and doing business as names	Business name(s)	Business name(s)
		EINs	EINs
5.	Where you live	1035 Woodland Ave	If Debtor 2 lives at a different address:
		Buena Vista, VA 24416 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Buena Vista City	Number, Sirect, Oity, State & Zii Gode
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	 Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Debtor 1

William Joseph Ramsey

Case 19-51072 Doc 1 Filed 12/12/19 Entered 12/12/19 14:49:51 Desc Main Page 3 of 61 Document Debtor 1 William Joseph Ramsey Debtor 2 Tracy Michelle Ramsey Case number (if known) Tell the Court About Your Bankruptcy Case 7. Check one. (For a brief description of each, see Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy The chapter of the Bankruptcy Code you are (Form 2010)). Also, go to the top of page 1 and check the appropriate box. choosing to file under Chapter 7 ☐ Chapter 11 ☐ Chapter 12 ☐ Chapter 13 How you will pay the fee I will pay the entire fee when I file my petition. Please check with the clerk's office in your local court for more details about how you may pay. Typically, if you are paying the fee yourself, you may pay with cash, cashier's check, or money order. If your attorney is submitting your payment on your behalf, your attorney may pay with a credit card or check with a pre-printed address. I need to pay the fee in installments. If you choose this option, sign and attach the Application for Individuals to Pay П The Filing Fee in Installments (Official Form 103A). I request that my fee be waived (You may request this option only if you are filing for Chapter 7. By law, a judge may, but is not required to, waive your fee, and may do so only if your income is less than 150% of the official poverty line that applies to your family size and you are unable to pay the fee in installments). If you choose this option, you must fill out the Application to Have the Chapter 7 Filing Fee Waived (Official Form 103B) and file it with your petition. Have you filed for No. bankruptcy within the last 8 years? ☐ Yes. When District Case number When District Case number When Case number District 10. Are any bankruptcy ■ No cases pending or being filed by a spouse who is ☐ Yes. not filing this case with you, or by a business partner, or by an affiliate? Debtor Relationship to you When Case number, if known District Debtor Relationship to you When Case number, if known District 11. Do you rent your Go to line 12. ☐ No. residence? Has your landlord obtained an eviction judgment against you? Yes. No. Go to line 12.

Yes. Fill out Initial Statement About an Eviction Judgment Against You (Form 101A) and file it with this

bankruptcy petition.

Page 4 of 61 Document Debtor 1 William Joseph Ramsey Debtor 2 Tracy Michelle Ramsey Case number (if known) Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor No. of any full- or part-time Go to Part 4. business? Name and location of business ☐ Yes. A sole proprietorship is a business you operate as Name of business, if any an individual, and is not a separate legal entity such as a corporation, partnership, or LLC. Number, Street, City, State & ZIP Code If you have more than one sole proprietorship, use a separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. No. For a definition of small business debtor, see 11 I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy □ No. U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any ■ No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own perishable goods, or livestock that must be fed, Where is the property? or a building that needs urgent repairs? Number, Street, City, State & Zip Code

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Debtor 1	William Joseph Ramsey		
Debtor 2	Tracy Michelle Ramsey	Case number (if known)	
Part 5:	Explain Your Efforts to Receive a Briefing About Credit Counseling		

15. Tell the court whether you have received a briefing about credit

counseling.

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

About Debtor 1:
You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I

filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

□ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

■ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

☐ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

☐ I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

☐ Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court.

Case 19-51072 Doc 1 Filed 12/12/19 Entered 12/12/19 14:49:51 Desc Main Page 6 of 61 Document Debtor 1 William Joseph Ramsey Debtor 2 **Tracy Michelle Ramsey** Case number (if known) Part 6: **Answer These Questions for Reporting Purposes** What kind of debts do Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. 16a. individual primarily for a personal, family, or household purpose." you have? ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative expenses Yes. after any exempt are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do **1**,000-5,000 **1** 25,001-50,000 1-49 you estimate that you **5001-10.000 5**0,001-100,000 **50-99** owe? **1**0,001-25,000 ☐ More than 100,000 **1**00-199 □ 200-999 19. How much do you **\$0 - \$50,000** □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million estimate your assets to □ \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million 20. How much do you \square \$1,000,001 - \$10 million **\$0 - \$50,000** □ \$500,000,001 - \$1 billion estimate your liabilities □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100.000.001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ William Joseph Ramsey /s/ Tracy Michelle Ramsey William Joseph Ramsey Tracy Michelle Ramsey Signature of Debtor 1 Signature of Debtor 2 Executed on December 11, 2019 Executed on December 11, 2019

MM / DD / YYYY

MM / DD / YYYY

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Debtor 1 William Joseph R Debtor 2 Tracy Michelle Ra	•	Cas	e number (if known)
For your attorney, if you are represented by one	under Chapter 7, 11, 12, or 13 of title 11, Unite for which the person is eligible. I also certify t	ed States Code, and have e that I have delivered to the c	informed the debtor(s) about eligibility to proceed explained the relief available under each chapter debtor(s) the notice required by 11 U.S.C. § 342(b)
If you are not represented by an attorney, you do not need to file this page.	and, in a case in which § 707(b)(4)(D) applies schedules filed with the petition is incorrect.	s, certify that I have no know	ledge after an inquiry that the information in the
to me tine page.	/s/ Donald M. Burks	Date	December 11, 2019
	Signature of Attorney for Debtor		MM / DD / YYYY
	Donald M. Burks Printed name		
	Don Burks P.C.		
	Firm name		
	30 Crossing Lane, Suite 205 Lexington, VA 24450		
	Number, Street, City, State & ZIP Code Contact phone 540 463-1080	Email address	bankruptcy@donburkslaw.com
	41311 VA		
	Bar number & State		

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Fill	in this inform	ation to identify your case:		
	otor 1	William Joseph Ramsey		
	7.01	First Name Middle Name Last Name		
	otor 2	Tracy Michelle Ramsey		
(Spo	use if, filing)	First Name Middle Name Last Name		
Unit	ted States Ban	kruptcy Court for the: WESTERN DISTRICT OF VIRGINIA		
Cas	se number			
	own)		☐ Che	eck if this is an
			am	ended filing
Of	ficial For	m 106Sum		
		Your Assets and Liabilities and Certain Statistical Information		12/15
info	rmation. Fill o	nd accurate as possible. If two married people are filing together, both are equally responsible fo ut all of your schedules first; then complete the information on this form. If you are filing amend s, you must fill out a new <i>Summary</i> and check the box at the top of this page.		
Par		rize Your Assets		
			Vau	
				r assets e of what you own
1.	Schodulo A/	B: Property (Official Form 106A/B)		,
١.	1a. Copy line	55, Total real estate, from Schedule A/B	\$_	0.00
	1b. Copy line	62, Total personal property, from Schedule A/B	\$	197,665.00
				•
	Tc. Copy line	63, Total of all property on Schedule A/B	\$_	197,665.00
Par	t 2: Summa	rize Your Liabilities		
				liabilities
			Amo	unt you owe
2.		Creditors Who Have Claims Secured by Property (Official Form 106D) total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$_	11,507.00
3.		Creditors Who Have Unsecured Claims (Official Form 106E/F)	\$	0.00
		total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	_	
	3b. Copy the	total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$_	26,007.00
		Vous total linkilision	Φ.	07.544.00
		Your total liabilities	\$	37,514.00
Par	t 2: Summa	rize Your Income and Evnences		
rai	i 5. Suillilla	rize Your Income and Expenses		
4.		Your Income (Official Form 106I) mbined monthly income from line 12 of Schedule I	\$	4,020.00
5.	.,,	Your Expenses (Official Form 106J)		
J.		onthly expenses from line 22c of Schedule J	\$_	3,985.00
Par	t 4: Answer	These Questions for Administrative and Statistical Records		
6.	Are you filing	g for bankruptcy under Chapters 7, 11, or 13?		
	☐ No. You	have nothing to report on this part of the form. Check this box and submit this form to the court with you	ur other :	schedules.
	Yes			
7.	What kind of	debt do you have?		
		bts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for old purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.	a person	al, family, or
		bbts are not primarily consumer debts. You have nothing to report on this part of the form. Check this t with your other schedules.	box and	submit this form to

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

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Debtor 1 Debtor 2	William Joseph Ramsey Tracy Michelle Ramsey	Case number (if known)	
	m the Statement of Your Current Monthly Income: Copy your total of A-1 Line 11; OR, Form 122B Line 11; OR, Form 122C-1 Line 14.	current monthly income from Official Form	\$ 4,247.17

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	Tota	al claim
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$_	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$_	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$_	0.00
9d. Student loans. (Copy line 6f.)	\$_	0.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$_	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$_	0.00
9g. Total. Add lines 9a through 9f.	\$	0.00

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			of the Character		
Fill in this i	information to iden	tify your case a	nd this filing:		
Debtor 1	William J	oseph Ramse	•		
Debtor 2		chelle Ramsey			
(Spouse, if filing		mene ivanisey	Middle Name Last Name		
United State	es Bankruptcy Cour	for the: WEST	ERN DISTRICT OF VIRGINIA		
Case numb	er				☐ Check if this is an
Case Harris					amended filing
Official	Form 106A	/R			
	dule A/B:		List an asset only once. If an asset fits in more than one		12/15
information. Answer every	If more space is need	ed, attach a separ	ossible. If two married people are filing together, both are a ate sheet to this form. On the top of any additional pages, or Other Real Estate You Own or Have an Interest In		
		<u> </u>			
. Do you ow	m or nave any legal o	r equitable interes	t in any residence, building, land, or similar property?		
No. Go	to Part 2.				
☐ Yes. W	here is the property?				
someone els	se drives. If you leas	e a vehicle, also	interest in any vehicles, whether they are registere report it on Schedule G: Executory Contracts and Une hicles, motorcycles	xpired Leases.	ehicles you own that
3.1 Make			Who has an interest in the property? Check one	the amount of any secure	ed claims on <i>Schedule D:</i>
Mode Year:			☐ Debtor 1 only	Creditors Who Have Cla	ims Secured by Property.
	oximate mileage:	117000	☐ Debtor 2 only ☐ Debtor 1 and Debtor 2 only	Current value of the entire property?	Current value of the portion you own?
	r information:		At least one of the debtors and another	entire property:	portion you own:
	a clean retail \$11	050	A reast one of the destors and another		
Ave	trade-in \$7200		☐ Check if this is community property	\$7,000.00	\$7,000.00
			(see instructions)		
Examples No Yes Add the pages y	: Boats, trailers, mot	tors, personal wa portion you ow or Part 2. Write	d other recreational vehicles, other vehicles, and a tercraft, fishing vessels, snowmobiles, motorcycle accentication of the second of the sec	essories entries for	\$7,000.00
Do you ow	n or have any lega	l or equitable in	erest in any of the following items?		Current value of the portion you own? Do not deduct secured claims or exemptions.

Official Form 106A/B Schedule A/B: Property page 1

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	ebtor 1 William Joseph Ramsey ebtor 2 Tracy Michelle Ramsey Case number (if known)
6.	Household goods and furnishings Examples: Major appliances, furniture, linens, china, kitchenware No Yes. Describe
	furniture, appliances, tools \$4,300.00
	The state of the s
7.	 Electronics Examples: Televisions and radios; audio, video, stereo, and digital equipment; computers, printers, scanners; music collections; electronic devices including cell phones, cameras, media players, games ■ No □ Yes. Describe
•	
8.	 Collectibles of value Examples: Antiques and figurines; paintings, prints, or other artwork; books, pictures, or other art objects; stamp, coin, or baseball card collections; other collections, memorabilia, collectibles ■ No □ Yes. Describe
9.	Equipment for sports and hobbies Examples: Sports, photographic, exercise, and other hobby equipment; bicycles, pool tables, golf clubs, skis; canoes and kayaks; carpentry tools; musical instruments ■ No □ Yes. Describe
	Firearms Examples: Pistols, rifles, shotguns, ammunition, and related equipment ■ No □ Yes. Describe Clothes
	Examples: Everyday clothes, furs, leather coats, designer wear, shoes, accessories □ No ■ Yes. Describe
	Clathan
_	Clothes \$200.00
12	Jewelry Examples: Everyday jewelry, costume jewelry, engagement rings, wedding rings, heirloom jewelry, watches, gems, gold, silver □ No ■ Yes. Describe
	wedding & engagement rings \$1,000.00
	ring, watch
13	Non-farm animals Examples: Dogs, cats, birds, horses ■ No □ Yes. Describe
14	Any other personal and household items you did not already list, including any health aids you did not list ■ No
	☐ Yes. Give specific information
15	5. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached for Part 3. Write that number here

Official Form 106A/B Schedule A/B: Property

page 2

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26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1).

Schedule A/B: Property

Official Form 106A/B

Page 13 of 61 Document Debtor 1 William Joseph Ramsey Debtor 2 **Tracy Michelle Ramsey** Case number (if known) No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit ■ No ☐ Yes. Give specific information about them... 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements $\hfill \square$ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Current value of the Money or property owed to you? portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you ☐ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... \$1,000.00 2019 Federal tax refund pro rated 29. Family support Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement ☐ Yes. Give specific information..... 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ■ No ☐ Yes. Give specific information.. 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance ☐ Yes. Name the insurance company of each policy and list its value. Company name: Beneficiary: Surrender or refund value: 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No \square Yes. Give specific information.. 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue ■ No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ■ No

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Document Page 14 of 61 Debtor 1 William Joseph Ramsey Debtor 2 **Tracy Michelle Ramsey** Case number (if known) ☐ Yes. Describe each claim........ 35. Any financial assets you did not already list □ No ■ Yes. Give specific information.. \$420.00 **Garnished wages** 36. Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$184,915.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38. Part 6: Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1. 46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property? No. Go to Part 7. ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 56. Part 2: Total vehicles, line 5 \$7,000.00 57. Part 3: Total personal and household items, line 15 \$5,750.00 58. Part 4: Total financial assets, line 36 \$184,915.00 59. Part 5: Total business-related property, line 45 \$0.00 60. Part 6: Total farm- and fishing-related property, line 52 \$0.00 61. Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$197,665.00 \$197,665.00 63. Total of all property on Schedule A/B. Add line 55 + line 62 \$197,665.00

Official Form 106A/B Schedule A/B: Property page 5

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Fill in this inform	ation to identify your	case:		
Debtor 1	William Joseph R	amsey		
	First Name	Middle Name	Last Name	
Debtor 2	Tracy Michelle Ra	nmsey		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ban	kruptcy Court for the:	WESTERN DISTRICT C	OF VIRGINIA	
Case number				
(II KIIOWII)				

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/19

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Part 1:	Identify the	Property	You Claim	as Exempt
---------	--------------	----------	-----------	-----------

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own	Amount of the exemption you claim		Specific laws that allow exemption
	Copy the value from Schedule A/B	Chec	sk only one box for each exemption.	
2013 Kia Sorento 117000 miles nada clean retail \$11050	\$7,000.00		\$853.00	Va. Code Ann. § 34-26(8)
Ave trade-in \$7200 Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
furniture, appliances, tools Line from Schedule A/B: 6.1	\$4,300.00		\$4,300.00	Va. Code Ann. § 34-26(4a)
Line from Schedule AVD. 0.1			100% of fair market value, up to any applicable statutory limit	
Clothes Line from Schedule A/B: 11.1	\$200.00	•	\$200.00	Va. Code Ann. § 34-26(4)
Ellie Holli Genedale Av.B.			100% of fair market value, up to any applicable statutory limit	
wedding & engagement rings Line from Schedule A/B: 12.1	\$1,000.00		\$1,000.00	Va. Code Ann. § 34-26(1a)
Line IIIII Schedule AVD. 12.1			100% of fair market value, up to any applicable statutory limit	
ring, watch Line from Schedule A/B: 12.2	\$250.00		\$250.00	Va. Code Ann. § 34-4
EIRC HOTH GOLIGUUIG FVD. 12.2			100% of fair market value, up to any applicable statutory limit	

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Debtor 2				Case number (if known)	
	ef description of the property and line on nedule A/B that lists this property	Current value of the portion you own	Am	ount of the exemption you claim	Specific laws that allow exemption
		Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
Ca	sh e from Schedule A/B: 16.1	\$600.00		\$600.00	Va. Code Ann. § 34-4
L	e nom somedule /v2. 1911			100% of fair market value, up to any applicable statutory limit	
	rter Trust e from Schedule A/B: 17.1	\$25.00		\$25.00	Va. Code Ann. § 34-4
LIII	e nom schedule A.B. TTT			100% of fair market value, up to any applicable statutory limit	
-	1K \$8989 OP ADS \$173,882	\$182,870.00		\$182,870.00	Va. Code Ann. § 34-34
	e from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	
	19 Federal tax refund pro rated	\$1,000.00		\$1,000.00	Va. Code Ann. § 34-4
LIII	e IIOIII <i>Scriedule A/B.</i> 20:1			100% of fair market value, up to any applicable statutory limit	
	rnished wages	\$420.00		\$420.00	Va. Code Ann. § 34-4
LIII	e IIOIII <i>Scriedule A/B.</i> 33: 1			100% of fair market value, up to any applicable statutory limit	
	e you claiming a homestead exemption ubject to adjustment on 4/01/22 and every			led on or after the date of adjustmen	ıt.)
_				045 1 1 6 61 141	
	Yes. Did you acquire the property cover No	rea by the exemption wi	tnin 1	,215 days before you filed this case?	,
	☐ Yes				

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					_	
FIII	in this inform	ation to identify you	r case:			
Deb	tor 1	William Joseph	Ramsey			
		First Name	Middle Name Last Name			
	tor 2	Tracy Michelle F				
(Spot	use if, filing)	First Name	Middle Name Last Name			
Unit	ed States Banl	kruptcy Court for the:	WESTERN DISTRICT OF VIRGINIA			
	e number					
(if kno	own)				. –	if this is an
L					amend	ded filing
Off	icial Form	106D				
			Who Have Claims Secured	l by Proport	\	12/15
<u> </u>	nedule i	J. Creditors	Wild Have Claims Secured	by Propert	у	12/13
is ne			If two married people are filing together, both are equout, number the entries, and attach it to this form. On			
	` '	nave claims secured by	your property?			
	☐ No. Check t	this box and submit th	nis form to the court with your other schedules. Yo	u have nothing else t	o report on this form.	
	_	all of the information l	•	3		
			oelow.			
		Secured Claims		Column A	Column B	Column C
			nore than one secured claim, list the creditor separately a particular claim, list the other creditors in Part 2. As	Amount of claim	Value of collateral	Unsecured
muc	h as possible, lis	t the claims in alphabetic	cal order according to the creditor's name.	Do not deduct the	that supports this	portion
	Hevener's	Cars and		value of collateral.	claim	If any
2.1	Trucks	ouro una	Describe the property that secures the claim:	\$6,147.00	\$7,000.00	\$0.00
	Creditor's Name		2013 Kia Sorento 117000 miles			
			nada clean retail \$11050			
			Ave trade-in \$7200			
	785 Longh	ollow Rd	As of the date you file, the claim is: Check all that apply.			
	Buena Vist	a, VA 24416	Contingent			
	Number, Street, 0	City, State & Zip Code	☐ Unliquidated			
			☐ Disputed			
Who	owes the deb	ot? Check one.	Nature of lien. Check all that apply.			
	Debtor 1 only		An agreement you made (such as mortgage or secu	ured		
	Debtor 2 only		car loan)			
	Debtor 1 and Deb	otor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
_		e debtors and another	☐ Judgment lien from a lawsuit			
	Check if this claic community deb		Other (including a right to offset)			
Date	debt was incur	rred	Last 4 digits of account number			

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Debtor 1 William Joseph Ramse	y C	ase number (if known)		
First Name Middle N	Name Last Name	_		
Debtor 2 Tracy Michelle Ramsey				
First Name Middle N	Name Last Name			
2.2 Rent-A-Center	Describe the property that secures the claim:	\$2,000.00	\$4,300.00	\$1,060.00
Creditor's Name	furniture, appliances, tools rent to own			
850 Statler Blvd Staunton, VA 24401	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
☐ Debtor 1 only ☐ Debtor 2 only	☐ An agreement you made (such as mortgage or sector car loan)	ured		
■ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
☐ At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Date debt was incurred	Last 4 digits of account number			
2.3 Schewel Furn	Describe the property that secures the claim:	\$3,360.00	\$4,300.00	\$0.00
Creditor's Name	furniture, appliances, tools			
485 E Nelson St Lexington, VA 24450	As of the date you file, the claim is: Check all that apply. Contingent			
Number, Street, City, State & Zip Code	☐ Unliquidated			
Who owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.			
■ Debtor 1 only □ Debtor 2 only	☐ An agreement you made (such as mortgage or sectoral loan)	ured		
☐ Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, mechanic's lien)			
lacksquare At least one of the debtors and another	☐ Judgment lien from a lawsuit			
☐ Check if this claim relates to a community debt	Other (including a right to offset)			
Opened 7/27/19 Last Active 07/19	Last 4 digits of account number 0014			
Add the dollar value of your entries in (Column A on this page. Write that number here:	\$11,507.00		
If this is the last page of your form, add Write that number here:	I the dollar value totals from all pages.	\$11,507.00		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

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Fill in th	is informa	tion to identify your	case:					
Debtor 1		William Joseph R	amsev					
		First Name	Middle N	ame	Last Name			
Debtor 2		Tracy Michelle Ra						
(Spouse if,	filing)	First Name	Middle N	ame	Last Name			
United S	states Bank	ruptcy Court for the:	WESTERN	DISTRICT OF VI	IRGINIA			
(if known)	mber			_				Check if this is an
,								amended filing
								3
		106E/F						
Sched	dule E/I	F: Creditors W	ho Have	Unsecure	d Claims			12/15
Schedule Schedule left. Attacl	G: Executor D: Creditors h the Contir case numb	ry Contracts and Unexp s Who Have Claims Sec	ired Leases (Of ured by Proper e. If you have r	fficial Form 106G) ty. If more space i no information to i	. Do not include is needed, copy	any creditor the Part you	Schedule A/B: Property (Offi s with partially secured claim need, fill it out, number the e lat Part. On the top of any add	ns that are listed in entries in the boxes on the
		have priority unsecure						
_	o. Go to Par		u ciaiiiis agaiii	st you :				
		l Z.						
☐ Ye	es.							
Part 2:	List All	of Your NONPRIORIT	Y Unsecured	Claims				
3. Do ar	ny creditors	have nonpriority unsec	ured claims ag	gainst you?				
□ No	o. You have	nothing to report in this pa	art. Submit this	form to the court wi	th your other sch	edules.		
■ Ye	00							
4. List a	all of your n cured claim, one creditor	list the creditor separately	for each claim.	. For each claim list	ed, identify what	ype of claim	claim. If a creditor has more the it is. Do not list claims already in ority unsecured claims fill out the	ncluded in Part 1. If more
								Total claim
4.1	American	First Finance		Last 4 digits of a	ccount number	0001		\$660.00
		reditor's Name				_	0/00/40 1 4 4 4	
	Attn: Ban Po Box 5			When was the de	ht incurred?	7/03/19	2/02/19 Last Active	
	Dallas, T			Which was the ac	bt incurred.	1703/13		_
		et City State Zip Code		As of the date yo	u file, the claim	is: Check all	that apply	
١	Who incurre	ed the debt? Check one.						
I	Debtor 1	only		☐ Contingent				
I	Debtor 2	only		☐ Unliquidated				
I	Debtor 1	and Debtor 2 only		☐ Disputed				
I	At least o	one of the debtors and and	other	Type of NONPRIO	ORITY unsecure	d claim:		
I	☐ Check if	this claim is for a comr	nunity	☐ Student loans				
C	debt	subject to offset?	-	Obligations ariseport as priority c		ration agree	ment or divorce that you did not	t
	■ No	•				g plans, and	other similar debts	
	— No □ Yes			Other. Specify	-			
	– 168			Other. Specify	Juseculeu			

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	1 William Joseph Ramsey 2 Tracy Michelle Ramsey		Case number (if known)		
4.2	Augusta Health Nonpriority Creditor's Name	Last 4 digits of account number	6978	\$1,290.00	
	PO Box 1000	When was the debt incurred?			
	Fisherville, VA 22939 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.	•	,		
	Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	Other. Specify med			
4.3	Carilion Clinic	Last 4 digits of account number	1665	\$232.00	
	Nonpriority Creditor's Name PO Box 13966 Roanoke, VA 24038-3966	When was the debt incurred?			
	Number Street City State Zip Code	As of the date you file, the claim			
	Who incurred the debt? Check one.	•			
	■ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only				
	☐ Debtor 1 and Debtor 2 only				
	☐ At least one of the debtors and another				
	☐ Check if this claim is for a community	☐ Student loans	☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not		
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	No	Debts to pension or profit-sharir	a plans, and other similar debts		
	□ Yes	Other. Specify med	g pians, and other similar debts		
		· · · ·			
4.4	Cnac - Va102 Nonpriority Creditor's Name	Last 4 digits of account number	3122	Unknown	
	3141 Peters Creek Rd Nw Roanoke, VA 24019	When was the debt incurred?	Opened 10/13 Last Active 4/15/15		
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	☐ Debtor 2 only	ebtor 2 only Unliquidated			
	■ Debtor 1 and Debtor 2 only	☐ Disputed			
	\square At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	No	report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts			
	Yes	·			
	□ 169	Other. Specify Automobile	•		

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	William Joseph Ramsey Tracy Michelle Ramsey		Case number (if known)	
	Comenity Bank/Peebles	Last 4 digits of account number	6716	Unknown
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 182125 Columbus, OH 43218 Number Street City State Zip Code	When was the debt incurred? As of the date you file, the claim i	Opened 8/09/16 Last Active 6/02/17 s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community debt		ration agreement or divorce that you did not	
	Is the claim subject to offset?	report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	
4.6	Comenity Bank/Victoria Secret Nonpriority Creditor's Name	Last 4 digits of account number	5820	Unknown
	Attn: Bankruptcy Po Box 182125 Columbus. OH 43218	When was the debt incurred?	Opened 8/16/16 Last Active 6/02/17	
-	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	■ Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims		
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	
4.7	Comenity Capital/Zales Nonpriority Creditor's Name	Last 4 digits of account number	6732	Unknown
	Attn: Bankrutptcy Dept Po Box 18215 Columbus, OH 43218	When was the debt incurred?	Opened 8/16/16 Last Active 6/02/17	
	Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply	
	Who incurred the debt? Check one.			
	☐ Debtor 1 only ☐ Contingent			
	■ Debtor 2 only			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharin		
	Yes	Other. Specify Charge Acc	count	

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	William Joseph Ramsey Tracy Michelle Ramsey		Case number (if known)	
4.8	Continental Finance Co	Last 4 digits of account number	8351	Unknown
	Po Box 8099 Newark, DE 19714 Number Street City State Zip Code Who incurred the debt? Check one.	When was the debt incurred? As of the date you file, the claim	Opened 03/16 Last Active 8/04/16 s: Check all that apply	
	Debtor 1 only	☐ Contingent		
	☐ Debtor 2 only	☐ Unliquidated		
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	Student loans		
	debt Is the claim subject to offset?	report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	
4.9	Continental Finance Co Nonpriority Creditor's Name	Last 4 digits of account number	2962	Unknown
	Po Box 8099 Newark, DE 19714	When was the debt incurred?	Opened 3/09/16 Last Active 6/03/16	
-	Number Street City State Zip Code Who incurred the debt? Check one. As of the date you file, the		s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	Debtor 2 only	☐ Unliquidated		
	☐ Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured		
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not	
	No	Debts to pension or profit-sharin	a plane, and other similar debts	
	□ Yes	Other. Specify Credit Card		
		— Other. Specify	·	
4.1 0	Credit One Bank Nonpriority Creditor's Name	Last 4 digits of account number	5795	Unknown
	Attn: Bankruptcy Department Po Box 98873 Las Vegas, NV 89193	When was the debt incurred?	Opened 02/16 Last Active 9/02/16	
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply	
	■ Debtor 1 only	☐ Contingent		
	□ Debtor 2 only □ Unliquidated			
	Debtor 1 and Debtor 2 only	☐ Disputed		
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
	☐ Check if this claim is for a community	☐ Student loans		
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
	Yes	Other. Specify Credit Card	<u> </u>	

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	or 1 William Joseph Ramsey or 2 Tracy Michelle Ramsey		Case number (if known)			
4.1	Easy Pay/Duvera Collections	Last 4 digits of account number	9675	Unknown		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 2549 Carlsbad, CA 92018	When was the debt incurred?	Opened 5/12/19 Last Active 7/12/19			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only ☐ At least one of the debtors and another	☐ Disputed Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Student loans ☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify Installment	Sales Contract			
4.1 2	Fingerhut	Last 4 digits of account number	3948	Unknown		
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 1250 Saint Cloud, MN 56395	When was the debt incurred?	Opened 04/16 Last Active 8/03/17			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	☐ Debts to pension or profit-sharin				
	☐ Yes	Other. Specify Charge Acc	count			
4.1 3	First PREMIER Bank Nonpriority Creditor's Name	Last 4 digits of account number	5994	\$680.00		
	Attn: Bankruptcy Po Box 5524 Sioux Falls. SD 57117	When was the debt incurred?	Opened 12/15 Last Active 6/02/17			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims				
	■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
	□ Yes	■ Other. Specify Credit Card				
	— 163	- Otner. Specify	•			

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First PREMIER Bank	Last 4 digits of account number	7173	\$548.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 5524	When was the debt incurred?	Opened 02/19 Last Active 2/15/19	
Sioux Falls, SD 57117 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only □ Debtor 2 only	☐ Contingent ☐ Unliquidated		
	_ `		
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured	d claim:	
At least one of the debtors and another	Student loans	a ciaiii.	
☐ Check if this claim is for a community debt Is the claim subject to offset?		aration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharin	g plans, and other similar debts	
Yes	Other Specify Credit Card		
Fnb Omaha	Last 4 digits of account number	5847	\$842.0
Nonpriority Creditor's Name	_		
P.o. Box 3412 Omaha, NE 68197	When was the debt incurred?	Opened 08/16 Last Active 3/06/17	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
☐ Debtor 1 only	☐ Contingent		
■ Debtor 2 only	☐ Unliquidated		
Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community	☐ Student loans		
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not	
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
Yes	Other. Specify Charge Acc	count	
Genesis Bc/Celtic Bank	Last 4 digits of account number	6979	\$433.0
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 4477 Beaverton, OR 97076	When was the debt incurred?	Opened 01/19 Last Active 3/22/19	
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply	
■ Debtor 1 only	☐ Contingent		
Debtor 2 only	☐ Unliquidated		
☐ Debtor 1 and Debtor 2 only	☐ Disputed		
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:	
☐ Check if this claim is for a community debt	☐ Student loans ☐ Obligations arising out of a sepa	ration agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims		
■ No	Debts to pension or profit-sharing	g plans, and other similar debts	
□Yes	■ Other. Specify Credit Card	I	

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Debtor Debtor	1 William Joseph Ramsey 2 Tracy Michelle Ramsey		Case number (if known)		
4.1	Jefferson Capital Systems, LLC	Last 4 digits of account number	2003	\$1,874.00	
	Nonpriority Creditor's Name Po Box 1999 Saint Cloud, MN 56302	When was the debt incurred?	Opened 03/18		
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
	☐ Debtor 1 only	☐ Contingent			
	■ Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only	☐ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Factoring (Direct Mrkt	Company Account Fingerhut ing		
4.1	Jefferson Capital Systems, LLC	Last 4 digits of account number	1003	\$354.00	
	Nonpriority Creditor's Name Po Box 1999 Saint Cloud, MN 56302	When was the debt incurred?	Opened 11/18		
	Number Street City State Zip Code As of the date you file, the claim i		is: Check all that apply		
	Who incurred the debt? Check one.	•			
	☐ Debtor 1 only ☐ Contingent				
	■ Debtor 2 only □ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	□ Disputed			
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
	☐ Check if this claim is for a community	☐ Student loans			
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not		
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts		
	Yes	■ Other. Specify Card	Company Account First Access		
4.1 9	Kohls/Capital One	Last 4 digits of account number	5643	\$710.00	
	Nonpriority Creditor's Name Attn: Bankruptcy Po Box 30285	When was the debt incurred?	Opened 08/16 Last Active 8/03/17		
	Salt Lake City, UT 84130 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply		
	Who incurred the debt? Check one.				
	☐ Debtor 1 only	☐ Contingent			
	Debtor 2 only	☐ Unliquidated			
	☐ Debtor 1 and Debtor 2 only				
	lacksquare At least one of the debtors and another	Type of NONPRIORITY unsecured claim:			
	Check if this claim is for a community	<u> </u>			
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims			
	No	Debts to pension or profit-sharing	- 		
	Yes	■ Other. Specify Charge Acc	count		

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2 Tracy Michelle Ramsey		Case number (if known)		
LVNV Funding/Resurgent Capital	Last 4 digits of account number	5795	\$662.00	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497	When was the debt incurred?	Opened 05/17		
Greenville, SC 29603 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply		
Who incurred the debt? Check one.	• •	As of the date you me, the dam is. Oneon an that apply		
■ Debtor 1 only	☐ Contingent			
Debtor 2 only	☐ Unliquidated			
Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	report as priority claims	aration agreement or divorce that you did not		
■ No	Debts to pension or profit-sharing			
Yes	■ Other. Specify ■ Other. Specify	Company Account Credit One		
LVNV Funding/Resurgent Capital	Last 4 digits of account number	5442	\$448.00	
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 10497 Greenville, SC 29603	When was the debt incurred?	Opened 01/18		
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply			
■ Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
☐ Debtor 1 and Debtor 2 only	☐ Disputed			
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured			
☐ Check if this claim is for a community	☐ Student loans			
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims			
■ No	Debts to pension or profit-sharing	ng plans, and other similar debts		
Yes	■ Other. Specify Factoring C Fingerhut	Company Account Webbank		
Medkey	Last 4 digits of account number		\$2,800.00	
Nonpriority Creditor's Name 213 S Jefferson St #303 Roanoke, VA 24011	When was the debt incurred?			
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply		
Debtor 1 only	☐ Contingent			
☐ Debtor 2 only	☐ Unliquidated			
■ Debtor 1 and Debtor 2 only	☐ Disputed			
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:		
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not		
Is the claim subject to offset? ■ No	report as priority claims Debts to pension or profit-sharin	og plans, and other similar debts		
	' '	יש אומוים, מווע טנוופו אווווומו עפטנא		
Yes	Other. Specify Judgment			

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1 William Joseph Ramsey 2 Tracy Michelle Ramsey	Case number (if known)					
Midland Funding	Last 4 digits of account number	7378	\$812.00			
Nonpriority Creditor's Name 2365 Northside Dr Ste 300	When was the debt incurred?	Opened 11/17				
San Diego, CA 92108						
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	s: Check all that apply				
Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:				
_	☐ Student loans					
☐ Check if this claim is for a community debt	_	ration agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims	and agreement of arrefeed that you are not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	■ Other. Specify Capital Bar	Company Account Comenity nk				
Midland Funding	Last 4 digits of account number	0551	\$626.00			
Nonpriority Creditor's Name 2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred?	Opened 12/17				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
lacksquare At least one of the debtors and another						
Check if this claim is for a community debt	Student loans	ration agreement or divorce that you did not				
Is the claim subject to offset?	report as priority claims	nation agreement of divorce that you did not				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Yes	■ Other. Specify Factoring (Bank					
Midland Funding	Last 4 digits of account number	4661	\$517.00			
Nonpriority Creditor's Name 2365 Northside Dr Ste 300 San Diego, CA 92108	When was the debt incurred?	Opened 11/17				
Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply				
Who incurred the debt? Check one.						
☐ Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	☐ At least one of the debtors and another Type of NONPRIORITY unsecured claim:					
☐ Check if this claim is for a community ☐ Student loans						
debt Is the claim subject to offset?	Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
■ No	Debts to pension or profit-sharing	g plans, and other similar debts				
Factoring Company Account Comenity Yes Other. Specify Bank						

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	or 1 William Joseph Ramsey or 2 Tracy Michelle Ramsey	Case number (if known)				
4.2 6	OneMain Financial	Last 4 digits of account number	1766	\$7,594.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 601 Nw 2nd St #300	When was the debt incurred?	Opened 12/18 Last Active 6/21/19			
	Evansville, IN 47708 Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.	•	, and an area of the second of			
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	■ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐ Yes	Other. Specify Unsecured				
4.2 7	Portfolio Recovery	Last 4 digits of account number	9030	\$615.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 120 Corporate Blvd	When was the debt incurred?	Opened 11/17			
	Norfold, VA 23502 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	■ Other. Specify Factoring C Bank	Company Account Synchrony			
4.2 8	Portfolio Recovery	Last 4 digits of account number	7853	\$441.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 120 Corporate Blvd Norfold, VA 23502	When was the debt incurred?	Opened 12/17			
	Number Street City State Zip Code	As of the date you file, the claim	is: Check all that apply			
	Who incurred the debt? Check one.					
	☐ Debtor 1 only	☐ Contingent				
	Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecure	d claim:			
	Check if this claim is for a community	Student loans				
	debt Is the claim subject to offset? —	report as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing				
	☐ Yes	■ Other. Specify Factoring (Bank	Company Account Synchrony			

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Portfolio Recovery	Last 4 digits of account number	3163	\$153.0			
Nonpriority Creditor's Name Attn: Bankruptcy 120 Corporate Blvd Norfold, VA 23502	When was the debt incurred?	Opened 6/20/14				
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
Who incurred the debt? Check one.						
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	ration agreement or divorce that you did not				
No	Debts to pension or profit-sharin	g plans, and other similar debts				
☐ Yes	■ Other. Specify 08 Capital 0	One Bank Usa N A				
Recivable Management Services.		9060	\$87.00			
LLC Nonpriority Creditor's Name	Last 4 digits of account number		φοτ.υ			
Attn: Bankruptcy 240 Emery Street	When was the debt incurred?	Opened 2/07/15				
Bethlehem, PA 18015 Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply				
Who incurred the debt? Check one.	7.5 or the date you me, the claim.	o. Oncor all that apply				
Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
☐ Debtor 1 and Debtor 2 only	□ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	 ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims ☐ Debts to pension or profit-sharing plans, and other similar debts 					
No						
☐ Yes	Other. Specify 06 Progress					
SCA Credit Svcs	Last 4 digits of account number	1250	\$774.00			
Nonpriority Creditor's Name						
Attn: Bankruptcy 1502 Williamson Road Roanoke, VA 24012	When was the debt incurred?	Opened 12/06/18				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	s: Check all that apply				
Debtor 1 only	☐ Contingent					
Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans ☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims					
☐ Check if this claim is for a community						
debt ls the claim subject to offset?						
	_					
No	☐ Debts to pension or profit-sharin ☐ Other. Specify Carilion Sto	• •				

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SCA Credit Svcs	Last 4 digits of account number	3703	\$767.0		
Nonpriority Creditor's Name Attn: Bankruptcy 1502 Williamson Road Roanoke, VA 24012	When was the debt incurred?	Opened 3/25/19			
Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.					
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community debt		aration agreement or divorce that you did not			
Is the claim subject to offset?	report as priority claims				
■ No	Debts to pension or profit-sharing				
Yes	Other. Specify Carilion Sto	onewall Jackson			
SCA Credit Svcs	Last 4 digits of account number	6436	\$524.00		
Nonpriority Creditor's Name Attn: Bankruptcy 1502 Williamson Road	When was the debt incurred?	Opened 11/13/18			
Roanoke, VA 24012 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	Other. Specify Carilion Sto	onewall Jackson			
SCA Credit Svcs	Last 4 digits of account number	6323	\$91.00		
Nonpriority Creditor's Name Attn: Bankruptcy 1502 Williamson Road	When was the debt incurred?	Opened 10/23/17			
Roanoke, VA 24012 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply			
Who incurred the debt? Check one.	,				
☐ Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
No	Debts to pension or profit-sharing	g plans, and other similar debts			
☐ Yes	■ Other. Specify Carilion Ps	v Rob Mod St Alba			

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Debt Debt			Case number (if known)			
1.3	SCA Credit Svcs	Last 4 digits of account number	4010	\$80.00		
	Nonpriority Creditor's Name Attn: Bankruptcy 1502 Williamson Road Roanoke, VA 24012	When was the debt incurred?	Opened 4/03/18			
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	No	Debts to pension or profit-sharin	•			
	Yes	Other. Specify Carilion Ed	Sjh			
1.3 S	Shenandoah Dermatology	Last 4 digits of account number	8575	\$224.00		
	Nonpriority Creditor's Name 1600 N Coalter St, Ste 19 Staunton, VA 24401	When was the debt incurred?				
	Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	☐ Debtor 1 and Debtor 2 only	☐ Disputed				
	\square At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	Yes	Other. Specify med svcs				
1.3	Southwest Credit Systems	Last 4 digits of account number	0871	\$502.00		
	Nonpriority Creditor's Name 4120 International Parkway Suite 1100	When was the debt incurred?	Opened 02/19			
	Carrollton, TX 75007 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim	is: Check all that apply			
	Debtor 1 only	☐ Contingent				
	■ Debtor 2 only	☐ Unliquidated				
	Debtor 1 and Debtor 2 only	☐ Disputed				
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:				
	☐ Check if this claim is for a community	☐ Student loans				
	debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not			
	■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
	☐Yes	■ Other. Specify Collection	Attorney Comcast			

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Tracy Michelle Ramsey		Case number (if known)			
Synchrony Bank/Walmart	Last 4 digits of account number	7853	Unknown		
Nonpriority Creditor's Name Attn: Bankruptcy Po Box 965060 Orlando, FL 32896	When was the debt incurred?	Opened 08/16 Last Active 6/02/17			
Number Street City State Zip Code	As of the date you file, the claim	s: Check all that apply			
Who incurred the debt? Check one.					
☐ Debtor 1 only	☐ Contingent				
■ Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
\square At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	ration agreement or divorce that you did not			
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
Yes	■ Other. Specify Charge Acc	count			
Telecom Self-reported	Last 4 digits of account number	0E2C	\$146.00		
Nonpriority Creditor's Name Po Box 4500	When was the debt incurred?	Last Active 4/22/19			
Allen, TX 75013 Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply				
Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	Debts to pension or profit-sharin	g plans, and other similar debts			
Yes	■ Other. Specify Agriculture	Chkg/Directv			
		4550	* 400.00		
Telecom Self-reported Nonpriority Creditor's Name	Last 4 digits of account number	<u>1F52</u>	\$108.00		
Po Box 4500 Allen, TX 75013	When was the debt incurred?	Last Active 4/08/19			
Number Street City State Zip Code	As of the date you file, the claim i	s: Check all that apply			
Who incurred the debt? Check one.					
☐ Debtor 1 only	☐ Contingent				
Debtor 2 only	☐ Unliquidated				
☐ Debtor 1 and Debtor 2 only	☐ Disputed				
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:			
☐ Check if this claim is for a community	☐ Student loans				
debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims				
■ No	Debts to pension or profit-sharing	g plans, and other similar debts			
☐ Yes	■ Other. Specify Agriculture	Chka/Boostmobile			

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Telecom Self-reported Nonpriority Creditor's Name	Last 4 digits of account number	6CB4	\$45.0			
Po Box 4500 Allen, TX 75013	When was the debt incurred?	Last Active 6/03/19				
Number Street City State Zip Code Who incurred the debt? Check one.	As of the date you file, the claim i	is: Check all that apply				
Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed					
At least one of the debtors and another	Type of NONPRIORITY unsecured	d claim:				
Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a sepa report as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
□ Yes	Other. Specify Agriculture	Chkg/Comcast				
Total Visa/Bank of Missouri	Last 4 digits of account number	9939	\$183.			
Nonpriority Creditor's Name Attn: Bankruptcy	_	Opened 04/19 Last Active				
Po Box 85710	When was the debt incurred?	7/21/19				
Sioux Falls, SD 57118 Number Street City State Zip Code	As of the date you file, the claim i	is: Check all that apply				
Who incurred the debt? Check one.	,	or official and apply				
Debtor 1 only	☐ Contingent ☐ Unliquidated					
■ Debtor 2 only						
☐ Debtor 1 and Debtor 2 only	☐ Disputed					
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans					
☐ Check if this claim is for a community						
debt Is the claim subject to offset?	Obligations arising out of a separeport as priority claims	Obligations arising out of a separation agreement or divorce that you did not				
■ No	Debts to pension or profit-sharin	o plans, and other similar debts				
□ Yes	■ Other. Specify Credit Card					
Valley Credit Service, Inc Nonpriority Creditor's Name	Last 4 digits of account number	0255	\$185.			
Attn: Bankruptcy Po Box 2162	When was the debt incurred?	Opened 4/04/17				
Hagerstown, MD 21742 Number Street City State Zip Code	As of the date you file, the claim i	is. Chack all that apply				
Who incurred the debt? Check one.	As of the date you file, the claim i	в. Спеск ан так арргу				
Debtor 1 only	☐ Contingent					
■ Debtor 2 only	☐ Unliquidated					
Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:					
☐ At least one of the debtors and another						
☐ Check if this claim is for a community	☐ Student loans					
debt Is the claim subject to offset?	☐ Obligations arising out of a separeport as priority claims	aration agreement or divorce that you did not				
■ No	Debts to pension or profit-sharin	g plans, and other similar debts				
☐ Yes	Other. Specify Augusta He	ealth Care For Wome				

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		oseph Ramsey helle Ramsey		Case nu	ımber (if known)			
4.4	Verizon Wir	eless	Last 4 digits of account numb	~*		Unknown		
4	Nonpriority Cred 5175 Emera Dublin, OH	ditor's Name	When was the debt incurred?					
1	Number Street (City State Zip Code	As of the date you file, the claim is: Check all that apply					
	Debtor 1 onl		☐ Contingent					
_	Debtor 2 onl	•	☐ Unliquidated					
	Debtor 1 and	•	☐ Disputed					
		of the debtors and another	Type of NONPRIORITY unsecu	red claim:				
_		s claim is for a community	☐ Student loans					
(debt	·		eparation ag	reement or divorce that you did not			
		bject to offset?	report as priority claims					
	No		☐ Debts to pension or profit-sha					
Yes			Other. Specify			-		
Part 3:	List Others	s to Be Notified About a De	ebt That You Already Listed					
is trying have m notified	g to collect fro ore than one c I for any debts	m you for a debt you owe to s		r in Parts 1 d dditional cre	or 2, then list the collection agency editors here. If you do not have add	y here. Similarly, if you		
	d Address	olutions	On which entry in Part 1 or Part 2 did y Line 4.13 of (<i>Check one</i>):		riginal creditor? Creditors with Priority Unsecured Clai	·		
Asset Recovery Solutions 2200 E. Devon Ave, Ste 200			Line 4.13 of (Check one).		Creditors with Priority Unsecured Clai			
	aines, IL 600			- Part 2: 0	Creditors with Nonphority Onsecured	Ciairis		
			Last 4 digits of account number					
	d Address nd Automot	tivo	On which entry in Part 1 or Part 2 did y		5			
_	illiamson R		Line 4.4 of (Check one): □ Part 1: Creditors with Priority Unsecured Claims ■ Part 2: Creditors with Nonpriority Unsecured Claims					
Roanol	ke, VA 2401	2		■ Part 2: 0	Creditors with Nonpriority Unsecured	Claims		
			Last 4 digits of account number					
	d Address		On which entry in Part 1 or Part 2 did y		5			
Medkey Po Box			Line 4.22 of (Check one): Part 1: Creditors with Priority Unsecured Claims Part 2: Creditors with Nonpriority Unsecured Claim					
Roanol	ke, VA 2402	2		■ Part 2: 0	Creditors with Nonpriority Unsecured	Claims		
			Last 4 digits of account number					
	d Address		On which entry in Part 1 or Part 2 did y					
	ke City GDC	; Ave SW 2nd Fl	Line 4.22 of (<i>Check one</i>):	_	Creditors with Priority Unsecured Clai			
	ke, VA 2401			■ Part 2: 0	Creditors with Nonpriority Unsecured	Claims		
			Last 4 digits of account number					
Part 4:	Add the Ar	mounts for Each Type of U	Insecured Claim					
	ne amounts of unsecured cla		aims. This information is for statistica	al reporting	purposes only. 28 U.S.C. §159. Ad	d the amounts for each		
	0	Demostic constant ablication		C-	Total Claim			
Total claims	6a.	Domestic support obligation	15	6a.	\$0.00	_		
from Part	t 1 6b.	Taxes and certain other deb	ts you owe the government	6b.	\$0.00	_		
	6c.		I injury while you were intoxicated	6c.	\$ 0.00	_		
	6d.	Other. Add all other priority un	nsecured claims. Write that amount here	. 6d.	\$ 0.00	_		
	6e.	Total Priority. Add lines 6a th	rough 6d.	6e.	\$0.00	_		
	6f.	Student loans		6f.	Total Claim \$ 0.00			
Total					<u> </u>	-		

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Debtor 1 William Joseph Ramsey Debtor 2 Tracy Michelle Ramsey Case number (if known) claims from Part 2 Obligations arising out of a separation agreement or divorce that you did not report as priority claims
Debts to pension or profit-sharing plans, and other similar debts 0.00 6g. 6h. 0.00 6i. Other. Add all other nonpriority unsecured claims. Write that amount 6i. 26,007.00 here. Total Nonpriority. Add lines 6f through 6i. 6j. 26,007.00 Case 19-51072 Doc 1 Filed 12/12/19 Entered 12/12/19 14:49:51 Desc Maii Document Page 36 of 61

Fill in this infor	mation to identify your	case:		
Debtor 1	William Joseph R	lamsey		
	First Name	Middle Name	Last Name	
Debtor 2	Tracy Michelle Ra	amsey		
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	WESTERN DISTRICT O	DF VIRGINIA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - ☐ Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

ļ	Person or	company with	whom you have the	e contract or lease	State what the contract or lease is for
2.1					
	Name				
	Number	Street			
	City		State	ZIP Code	
2.2					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.3	Oity		Olato	Zii Oodc	
0	Name				
	Number	Street			<u> </u>
	City		State	ZIP Code	
2.4					
	Name				
	Number	Street			
	City		State	ZIP Code	_
2.5	City		Olalo	Zii Oodo	
0	Name				_
	Number	Street			_
	City		State	ZIP Code	_

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Debtor 1	William Joseph F	Ramsey			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, filing)	Tracy Michelle R	Amsey Middle Name	Last Name		
	Bankruptcy Court for the:	WESTERN DISTRICT (
	aaptoj Godit ioi aioi				
Case number (if known)					☐ Check if this is an
					amended filing
Official E	orm 106H				
	e H: Your Cod	obtore			40/45
Scrieduic	en. Tour Cou	enroi 2			12/15
our name and	case number (if known)	. Answer every question			of any Additional Pages, write
•	nave any codebiors: (ii	you are ming a joint case,	do not list cities spouse	as a codebior.	
■ No □ Yes					
		I lived in a community pr , Nevada, New Mexico, Pu			states and territories include
■ No. Go t	to line 3.				
☐ Yes. Did	l your spouse, former spo	use, or legal equivalent live	e with you at the time?		
in line 2 ag	gain as a codebtor only i 0), Schedule E/F (Officia	f that person is a guaran	tor or cosigner. Make	sure you have listed th	g with you. List the person show he creditor on Schedule D (Officia Schedule E/F, or Schedule G to fi
	mn 1: Your codebtor Number, Street, City, State and Z	IP Code		Column 2: The cre Check all schedule	ditor to whom you owe the debt s that apply:
3.1				☐ Schedule D, line	9
Name				☐ Schedule E/F, li	
				☐ Schedule G, line	e
Numb City	er Street	State	ZIP Code	_	
		State	ZIF Code		
3.2				☐ Schedule D, line	
Name				Schedule E/F, li	
				☐ Schedule G, line	
Numb	er Street			<u> </u>	
City		State	ZIP Code		

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	to the test of a many than to take a tife or the same									
	in this information to identify your otor 1 William Jo	seph Ramsey								
		elle Ramsey			_					
	ted States Bankruptcy Court for th	e: _WESTERN DISTRIC	T OF VIRGINIA							
(If kr	fficial Form 106l		-			□ A □ A 1:		ed filing ent showin as of the fo	g postpetition ollowing date:	chapter
S	chedule I: Your Ind	come								12/1
sup spo atta	as complete and accurate as poplying correct information. If youse. If you are separated and you a separate sheet to this form T1: Describe Employment	u are married and not fili our spouse is not filing w . On the top of any additi	ng jointly, and your ith you, do not inclu	spouse de infor	is liv mati	ing with on about	you, incl your spo imber (if	ude inforr buse. If mo known). A	nation about ore space is	your needed,
	information.								ing spouse	
	If you have more than one job, attach a separate page with information about additional	Employment status	■ Employed□ Not employed				■ Emple	•		
	employers.	Occupation	line operator							
	Include part-time, seasonal, or self-employed work.	Employer's name	ADS							
	Occupation may include student or homemaker, if it applies.	Employer's address	Buena Vista, V	A 24416	i					
		How long employed t	here? <u>13</u>				_			
Pai	t 2: Give Details About M	onthly Income								
spoi	mate monthly income as of the use unless you are separated.				•				·	
nor	u or your non-filing spouse have r e space, attach a separate sheet t	nore than one employer, co o this form.	ombine the informatio	n for all	empl	oyers for	that perso	on on the li	nes below. If y	you need
						For Dek	otor 1		btor 2 or ng spouse	
2.	List monthly gross wages, sa deductions). If not paid monthly			2.	\$	4	240.00	\$	0.00	
3.	Estimate and list monthly ove	rtime pay.		3.	+\$		0.00	+\$	0.00	
4.	Calculate gross Income. Add	line 2 + line 3.		4.	\$	4,24	10.00	\$	0.00	

Official Form 106I Schedule I: Your Income page 1

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William Joseph Ramsey Debtor 1 Debtor 2 **Tracy Michelle Ramsey** Case number (if known) For Debtor 1 For Debtor 2 or non-filing spouse Copy line 4 here 4.240.00 0.00 List all payroll deductions: 5a. Tax, Medicare, and Social Security deductions 5a. 600.00 0.00 Mandatory contributions for retirement plans 5b. \$ 5b. 0.00 0.00 5c. Voluntary contributions for retirement plans 5c. \$ 60.00 0.00 Required repayments of retirement fund loans 5d. 5d. 0.00 0.00 5e. Insurance 5e. 350.00 0.00 5f. **Domestic support obligations** 5f. 0.00 0.00 5g. **Union dues** 5g. \$ 0.00 0.00 5h. Other deductions. Specify: 5h.+ \$ 0.00 0.00 Add the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. 6. 1,010.00 0.00 Calculate total monthly take-home pay. Subtract line 6 from line 4. 7. 7. \$ 3,230.00 0.00 8. List all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income. \$ 0.00 0.00 8a 8h. Interest and dividends 8h. \$ 0.00 0.00 Family support payments that you, a non-filing spouse, or a dependent 8c. regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. 8c. 0.00 0.00 8d. **Unemployment compensation** 8d. 0.00 0.00 **Social Security** 790.00 8e. 8e. 0.00 Other government assistance that you regularly receive 8f. Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. 8f. 0.00 0.00 Specify: \$ 8g. 8g. Pension or retirement income \$ 0.00 \$ 0.00 Other monthly income. Specify: 8h.+ 8h. \$ 0.00 0.00 Add all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. 9 0.00 790.00 10. Calculate monthly income. Add line 7 + line 9. 10. \$ \$ 3,230.00 790.00 \$ 4,020.00 Add the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. 11. State all other regular contributions to the expenses that you list in Schedule J. Include contributions from an unmarried partner, members of your household, your dependents, your roommates, and other friends or relatives. Do not include any amounts already included in lines 2-10 or amounts that are not available to pay expenses listed in Schedule J. Specify: 0.00 11. 12. Add the amount in the last column of line 10 to the amount in line 11. The result is the combined monthly income. Write that amount on the Summary of Schedules and Statistical Summary of Certain Liabilities and Related Data, if it 4,020.00 12. applies Combined monthly income 13. Do you expect an increase or decrease within the year after you file this form? No. П Yes. Explain:

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Fill	in this informa	ition to identify yo	our case:					
Deb	otor 1	William Jose	oh Rams	sev		Che	ck if this is:	
D-1			•		_		An amended filing	
	otor 2 ouse, if filing)	Tracy Miche	lle Rams	ey			13 expenses as of	ving postpetition chapter the following date:
'			MEST					
Unit	ted States Bankr	ruptcy Court for the	: WESTE	ERN DISTRICT OF VIRGI	NIA		MM / DD / YYYY	
1	se number							
(II K	nown)							
0	fficial Fo	rm 106J						
		J: Your	Exper	ises				12/1
Be info nur	as complete a ormation. If m mber (if know	and accurate as	possible eded, atta y questio	. If two married people a ch another sheet to this	re filing together, bo form. On the top of	oth are equ any additi	ally responsible fo onal pages, write y	or supplying correct your name and case
Par 1.	Is this a joir		illoiu					
	☐ No. Go to	line 2.						
	Yes. Doe	es Debtor 2 live i	in a separ	ate household?				
	■ N □ Y	-	st file Offici	al Form 106J-2, <i>Expense</i> s	s for Separate House	<i>hold</i> of Deb	tor 2.	
2.	Do vou have	e dependents?	□ No					
	Do not list D Debtor 2.	-	Yes.	Fill out this information for each dependent	Dependent's relation		Dependent's age	Does dependent live with you?
	Do not state	tho						□ No
	dependents				Daughter		11	■ Yes
							4.0	□ No
					Son		13	■ Yes
					Son		20	□ No ■ Yes
								□ No
								☐ Yes
3.		penses include f people other t	han	No				
		d your depende		Yes				
Par	t 2: Estim	ate Your Ongoi	na Monthi	v Expenses				
Est	imate your ex	cpenses as of you	our bankrı	uptcy filing date unless y y is filed. If this is a supp				
the		h assistance an		government assistance i cluded it on <i>Schedule I:</i> Y			Your exp	enses
(Ο.		,,						
4.		or home owners and any rent for the		ses for your residence. I r lot.	nclude first mortgage	4. 9	S	450.00
	If not includ	led in line 4:						
	4a. Real e	estate taxes				4a. S	6	0.00
		rty, homeowner's	s, or renter	's insurance		4b. S		0.00
				ipkeep expenses		4c. §		100.00
_		owner's associat			ama aquitu laana	4d. S	·	0.00
5.	Additional r	nortgage payme	ents for yo	our residence, such as ho	ine equity loans	5. 9	•	0.00

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	am Joseph Ramsey y Michelle Ramsey	Case num	ber (if known)	
Utilities:				
	ricity, heat, natural gas	6a.	\$	300.00
	r, sewer, garbage collection	6b.	· ·	200.00
	shone, cell phone, Internet, satellite, and cable services	6c.		200.00
	r. Specify:	6d.		0.00
	nousekeeping supplies	7.		850.00
	and children's education costs	7. 8.	\$	250.00
	aundry, and dry cleaning	9.	\$	
O,	<i>3,</i>			200.00
	are products and services	10.	·	75.00
	d dental expenses	11.	\$	200.00
	tion. Include gas, maintenance, bus or train fare. Ide car payments.	12.	\$	450.00
	ent, clubs, recreation, newspapers, magazines, and books	13.	·	50.00
	contributions and religious donations	14.	· ·	-
	contributions and religious donations	14.	Φ	0.00
. Insurance.	de insurance deducted from your pay or included in lines 4 or 20.			
15a. Life ii		15a.	\$	0.00
15a. Lile II		15a. 15b.		
		15b. 15c.	·	0.00
	ele insurance		·	155.00
	rinsurance. Specify:	15d.	>	0.00
Specify: P	not include taxes deducted from your pay or included in lines 4 or 20. ersonal Property	16.	\$	30.00
	or lease payments:	4-	•	
	ayments for Vehicle 1	17a.	·	340.00
	ayments for Vehicle 2	17b.		0.00
17c. Othe	· · · ·	17c.	·	0.00
17d. Othe	r. Specify:	17d.	\$	0.00
	ents of alimony, maintenance, and support that you did not report as			0.00
	rom your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.		0.00
	nents you make to support others who do not live with you.		\$	0.00
Specify:		19.		
	property expenses not included in lines 4 or 5 of this form or on Scho			
	pages on other property	20a.		0.00
20b. Real	estate taxes	20b.		0.00
20c. Prope	erty, homeowner's, or renter's insurance	20c.	\$	0.00
20d. Main	renance, repair, and upkeep expenses	20d.	\$	0.00
20e. Home	eowner's association or condominium dues	20e.	\$	0.00
. Other: Spe	cify: Pet Care	21.	+\$	100.00
eyeglasse	•		+\$	35.00
			· -	33.00
	our monthly expenses			
	es 4 through 21.		\$	3,985.00
22b. Copy I	ine 22 (monthly expenses for Debtor 2), if any, from Official Form 106J-2		\$	
22c. Add lin	e 22a and 22b. The result is your monthly expenses.		\$	3,985.00
			<u> </u>	
	our monthly net income.			
, ,	line 12 (your combined monthly income) from Schedule I.	23a.		4,020.00
23b. Copy	your monthly expenses from line 22c above.	23b.	-\$	3,985.00
	act your monthly expenses from your monthly income.	00	•	35.00
The r	esult is your monthly net income.	23c.	\$	35.00
For example, modification to	do you expect to finish paying for your car loan within the year after you or the terms of your mortgage?			ease or decrease because of a
No.	[= · · ·			
Yes.	Explain here:			

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Fill in this info	ormation to identify your	case:					
Debtor 1	William Joseph R	amsey					
	First Name	Middle Name	Las	t Name			
Debtor 2	Tracy Michelle Ra						
(Spouse if, filing)	First Name	Middle Name	Las	t Name			
United States I	Bankruptcy Court for the:	WESTERN DISTRICT (OF VIRGINI	A			
Case number							
(if known)							Check if this is an
							amended filing
	<u>rm 106Dec</u> ation About a	ın Individual	Debt	or's	Schedules		12/15
f two married	people are filing together	r, both are equally respo	nsible for s	upplyir	ng correct information.		
obtaining mon ears, or both.		n connection with a bank			edules. Making a false sta esult in fines up to \$250,0		
Did you բ	pay or agree to pay some	one who is NOT an attor	rney to help	you fil	Il out bankruptcy forms?		
■ No							
☐ Yes.	. Name of person						etition Preparer's Notice, nature (Official Form 119)
	nalty of perjury, I declare are true and correct.	that I have read the sum	nmary and s	chedul	les filed with this declarat	ion and	
X /s/ W	illiam Joseph Ramsey	,	х	/s/ Tr	acy Michelle Ramsey		
	am Joseph Ramsey				y Michelle Ramsey		
Signa	ture of Debtor 1			Signat	ture of Debtor 2		
Date	December 11, 2019			Date	December 11, 2019		

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Fil	l in this infor	mation to identify you	r case:			
De	btor 1	William Joseph	Ramsev			
		First Name	Middle Name	Last Name		
	btor 2	Tracy Michelle R	Ramsey Middle Name	Last Name		
(Sp	ouse if, filing)	First Name				
Un	ited States Ba	inkruptcy Court for the:	WESTERN DISTRICT O	F VIRGINIA		
	se number _ nown)				_	check if this is an mended filing
	ficial Fo		Affairs for Indivi	duals Filing for B	Bankruptcy	4/19
info nun	ormation. If nontriber (if know	nore space is needed, n). Answer every ques	attach a separate sheet to	this form. On the top of any	equally responsible for sup y additional pages, write you	
1 e				Liveu belore		
1.	What is you	r current marital statu	IS?			
	■ Married Not ma					
2.	During the l	ast 3 vears, have you	lived anywhere other than	where you live now?		
	_	, ,	•	•		
	■ No	at all of the places you li	ived in the last 2 years. Do n	at include where you live now		
	LI TES. LI	st all of the places you i	ived in the last 3 years. Do n	ot include where you live now	v.	
	Debtor 1 P	rior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	Idress:	Dates Debtor 2 lived there
3. stat					nity property state or territory ico, Texas, Washington and W	
	■ No					
	☐ Yes. Ma	ake sure you fill out <i>Sch</i>	nedule H: Your Codebtors (O	fficial Form 106H).		
Pa	rt 2 Expla	in the Sources of You	r Income			
4.	Fill in the tot	al amount of income yo	u received from all jobs and	ng a business during this yeall businesses, including parter together, list it only once ur		ndar years?
	□ No ■ Yes. Fil	I in the details.				
			D.1.		Debtor 2	
			Debtor 1			
			Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of income Check all that apply.	Gross income (before deductions and exclusions)
		of current year until ed for bankruptcy:	Sources of income	(before deductions and		(before deductions

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Debto Debto				ph Ramsey le Ramsey					Case	number (if known)		
					Debtor 1					Debtor 2		
					Sources of Check all t		(befo	ss income ore deductions usions)	and	Sources of ind Check all that a		Gross income (before deductions and exclusions)
			dar year: December :	31, 2018)	■ Wages bonuses, t	, commissions, ips		\$35,25	0.00	☐ Wages, combonuses, tips	nmissions,	\$0.00
					☐ Operati	ing a business				☐ Operating a	business	
			lar year bef December :		■ Wages bonuses, t	, commissions, ips		\$54,10	0.00	■ Wages, combonuses, tips	nmissions,	\$2,600.00
					☐ Operati	ng a business				☐ Operating a	business	
_	_ N	No	ource and the	· ·	Debtor 1 Sources o	f income	Gros	ss income fro		Debtor 2 Sources of inc	come	Gross income
					Describe b	elow.	(befo	n source ore deductions usions)	and	Describe below		(before deductions and exclusions)
			1 of currer led for ban	nt year until kruptcy:	\$799/mo			\$	0.00			
Part :	3:	List	Certain Pa	yments You	Made Befor	re You Filed for	Bankru	ptcy				
	_	ither No.	Neither De individual p	ebtor 1 nor D primarily for a	ebtor 2 has personal, fa	amily, or househo	umer de old purpo	ebts. Consume ose."		are defined in 11 of \$6,825* or mo		1(8) as "incurred by an
			□ Yes	List below e paid that cre not include	each creditor editor. Do no payments to	ot include payment o an attorney for t	nts for de this bank	omestic suppo cruptcy case.	rt obliga		nild support a	ne total amount you nd alimony. Also, do
	Y	es.				primarily consu for bankruptcy, d			r a total	of \$600 or more?	?	
			■ No.	Go to line 7								
			□ Yes	include pay		mestic support o				the total amount ort and alimony.		creditor. Do not nclude payments to an
•	Credi	itor's	s Name and	l Address		Dates of payme	ent	Total amo	unt aid	Amount you still owe	Was this p	payment for

Page 45 of 61 Document Debtor 1 William Joseph Ramsey Debtor 2 **Tracy Michelle Ramsey** Case number (if known) Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony. No Yes. List all payments to an insider. Amount you Reason for this payment **Insider's Name and Address** Dates of payment **Total amount** still owe paid Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider. Yes. List all payments to an insider Insider's Name and Address Reason for this payment Dates of payment **Total amount** Amount you still owe Include creditor's name paid Part 4: Identify Legal Actions, Repossessions, and Foreclosures Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. Nο Yes. Fill in the details. Case title Nature of the case Court or agency Status of the case Case number 10. Within 1 year before you filed for bankruptcy, was any of your property repossessed, foreclosed, garnished, attached, seized, or levied? Check all that apply and fill in the details below. No. Go to line 11. Yes. Fill in the information below. **Creditor Name and Address Describe the Property** Value of the property Explain what happened Medkey wages 11/19 to 12/19 \$420.00 213 S Jefferson St #303 Roanoke, VA 24011 □ Property was repossessed. Property was foreclosed. Property was garnished. ☐ Property was attached, seized or levied. 11. Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? Nο Yes. Fill in the details. **Creditor Name and Address** Describe the action the creditor took Date action was Amount taken 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? No Yes

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Filed 12/12/19

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Case 19-51072 Doc 1 Filed 12/12/19 Entered 12/12/19 14:49:51 Page 46 of 61 Document William Joseph Ramsey Debtor 1 Debtor 2 **Tracy Michelle Ramsey** Case number (if known) Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Value Dates you gave the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value more than \$600 contributed **Charity's Name** Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? No Yes. Fill in the details. Value of property Describe the property you lost and Describe any insurance coverage for the loss Date of your how the loss occurred loss Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. **List Certain Payments or Transfers** 16. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property Date payment Amount of transferred or transfer was Address payment **Email or website address** made Person Who Made the Payment, if Not You Don Burks P.C. \$1,150.00 **Attorney Fees** 12/4/19 30 Crossing Lane, Suite 205 Lexington, VA 24450 bankruptcy@donburkslaw.com 17. Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone who promised to help you deal with your creditors or to make payments to your creditors? Do not include any payment or transfer that you listed on line 16. No Yes. Fill in the details.

transferred

Address

Person Who Was Paid

Description and value of any property

Amount of

payment

Date payment

made

or transfer was

Page 47 of 61 Document Debtor 1 William Joseph Ramsey Debtor 2 **Tracy Michelle Ramsey** Case number (if known) 18. Within 2 years before you filed for bankruptcy, did you sell, trade, or otherwise transfer any property to anyone, other than property transferred in the ordinary course of your business or financial affairs? Include both outright transfers and transfers made as security (such as the granting of a security interest or mortgage on your property). Do not include gifts and transfers that you have already listed on this statement. No Yes. Fill in the details. **Person Who Received Transfer** Description and value of Date transfer was Describe any property or **Address** property transferred payments received or debts made paid in exchange Person's relationship to you 19. Within 10 years before you filed for bankruptcy, did you transfer any property to a self-settled trust or similar device of which you are a beneficiary? (These are often called asset-protection devices.) Yes. Fill in the details. Name of trust Description and value of the property transferred **Date Transfer was** made Part 8: List of Certain Financial Accounts, Instruments, Safe Deposit Boxes, and Storage Units 20. Within 1 year before you filed for bankruptcy, were any financial accounts or instruments held in your name, or for your benefit, closed, sold, moved, or transferred? Include checking, savings, money market, or other financial accounts; certificates of deposit; shares in banks, credit unions, brokerage houses, pension funds, cooperatives, associations, and other financial institutions. Nο Yes. Fill in the details. Last 4 digits of Last balance Name of Financial Institution and Type of account or Date account was Address (Number, Street, City, State and ZIP account number instrument closed, sold, before closing or Code) moved, or transfer transferred 21. Do you now have, or did you have within 1 year before you filed for bankruptcy, any safe deposit box or other depository for securities, cash, or other valuables? No Yes. Fill in the details. Name of Financial Institution Who else had access to it? Describe the contents Do you still Address (Number, Street, City, have it? Address (Number, Street, City, State and ZIP Code) State and ZIP Code) 22. Have you stored property in a storage unit or place other than your home within 1 year before you filed for bankruptcy? No Yes. Fill in the details. Name of Storage Facility Describe the contents Who else has or had access Do you still Address (Number, Street, City, State and ZIP Code) to it? have it? Address (Number, Street, City, Part 9: Identify Property You Hold or Control for Someone Else Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone. Nο Yes. Fill in the details. **Owner's Name** Where is the property? Describe the property Value (Number, Street, City, State and ZIP Address (Number, Street, City, State and ZIP Code) Part 10: Give Details About Environmental Information For the purpose of Part 10, the following definitions apply: Environmental law means any federal, state, or local statute or regulation concerning pollution, contamination, releases of hazardous or

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Part 12: Sign Below

Name Address

Debtor 1

Debtor 2

I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers Statement of Financial Affairs for Individuals Filing for Bankruptcy Official Form 107 page 6

Date Issued

(Number, Street, City, State and ZIP Code)

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Debtor 1	William Joseph F	lamsey			
Debtor 2	Tracy Michelle R	amsey			Case number (if known)
with a bar		sult in fines up to \$250,000			or obtaining money or property by fraud in connection years, or both.
/s/ Willia	am Joseph Ramsey	<i>1</i>	/s/ Tra	acy Michelle Ramsey	,
William	Joseph Ramsey		Tracy	Michelle Ramsey	
Signatur	e of Debtor 1		Signat	ture of Debtor 2	
Date D	ecember 11, 2019		Date	December 11, 2019	9
Did you a	ttach additional page	s to Your Statement of Fin	ancial /	Affairs for Individuals F	illing for Bankruptcy (Official Form 107)?
No					
□ Yes					
Did you p	ay or agree to pay so	meone who is not an attor	ney to I	nelp you fill out bankru	ptcy forms?
No					
☐ Yes. Na	ame of Person	Attach the Bankruptcy Petis	tion Pre	parer's Notice, Declaration	on, and Signature (Official Form 119).

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Fill in this info	rmation to identify your c	ase:							
Debtor 1									
Dobtor 2		Middle Name	Last Name						
(Spouse if, filing)	First Name	Middle Name	Last Name						
United States B	ankruptcy Court for the:	WESTERN DISTR	RICT OF VIRGINIA						
Casa numbar									
(if known)				Check if this is an amended filing					
		n for Indiv	riduals Filing Under Cha _l	oter 7 12/15					
			out this form if:						
You must file th which	nis form with the court wi never is earlier, unless the	thin 30 days after	you file your bankruptcy petition or by the da						
		in a joint case, bo	th are equally responsible for supplying corre	ct information. Both debtors must					
write	your name and case num	ber (if known).	needed, attach a separate sheet to this form.	On the top of any additional pages,					
1. For any credi	bebor 2 Tracy Michelle Ramsey Description of Fortham Secured Districts Property Tacy Michelle Ramsey Michelle								
		at is collateral		• • • • • • • • • • • • • • • • • • • •					
	Hevener's Cars and Tr	ucks	_ ' ' '	□ No					
Description o	f 2013 Kia Sorento 1	17000 miles	☐ Retain the property and enter into a	Yes					
property	nada clean retail \$1		Retain the property and [explain]:						
occurring deb			pay as per contract						
Creditor's	Pont A Contor		D O manufacture and a second	Пи					
	Kent-A-Center			□ NO					
Description of	f furniture appliance	e toole		Yes					
•		3, 10013	_						
securing deb	t:								
Creditor's	Schewel Furn		☐ Surrender the property.	□ No					
Description of	f furniture, appliance	s. tools		■ Yes					
property	, appliance	-,· -	Retain the property and [explain]:						

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

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Debtor 1 Debtor 2	William Joseph Ramsey Tracy Michelle Ramsey	Case number (if known)	
securin	g debt:	pay as per contract	-
For any u	rmation below. Do not list real estate leases	ises sted in Schedule G: Executory Contracts and Unexpired s. Unexpired leases are leases that are still in effect; the se if the trustee does not assume it. 11 U.S.C. § 365(p)(2	lease period has not yet ended.
Describe	your unexpired personal property leases		Will the lease be assumed?
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No
Lessor's r Description Property:	name: on of leased		□ No
Lessor's r Description Property:	name: on of leased		□ No
Lessor's r Description Property:	name: on of leased		□ No □ Yes
Lessor's r Description Property:	name: on of leased		□ No
Lessor's r Description Property:	name: on of leased		□ No
property t	Sign Below nalty of perjury, I declare that I have indicate hat is subject to an unexpired lease. Villiam Joseph Ramsey iam Joseph Ramsey	ed my intention about any property of my estate that sec X /s/ Tracy Michelle Ramsey Tracy Michelle Ramsey	ures a debt and any personal
	ature of Debtor 1	Signature of Debtor 2 Date December 11, 2019	
Dale	December 11, 2013	Date December 11, 2019	

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Fill in this infor	mation to identify your case:				e box only as d	irected in	this form and i	n Form
Debtor 1	William Joseph Ramsey		12	2A-1Sı	ipb:			
Debtor 2 (Spouse, if filing)	Tracy Michelle Ramsey			■ 1. T	here is no pres	umption of	f abuse	
	Bankruptcy Court for the: Western District of	Virginia		á	he calculation to applies will be made of the calculation (Office)	nade unde	er <i>Chapter 7 M</i>	
Case number (if known)					The Means Test qualified military			
				□ Ch	eck if this is a	n amend	ed filina	<u>*</u>
Official F	orm 122A - 1						3	
	7 Statement of Your Cur	rent Moi	nthly Inc	com	е			12/19
attach a separat case number (if qualifying milita	and accurate as possible. If two married people at e sheet to this form. Include the line number to wi known). If you believe that you are exempted from ry service, complete and file <i>Statement of Exempt</i> slculate Your Current Monthly Income	nich the addition a presumption	nal information of abuse becar	applies. use you	On the top of ar	ny addition narily cons	al pages, write sumer debts or	your name and because of
1. What is y	vour marital and filing status? Check one onl	y.						
☐ Not m	arried. Fill out Column A, lines 2-11.							
■ Marrie	ed and your spouse is filing with you. Fill out	both Columns	A and B, lines	2-11.				
☐ Marrie	ed and your spouse is NOT filing with you. Y	ou and your s	spouse are:					
☐ Livi	ng in the same household and are not legal	ly separated.	Fill out both Co	olumns	A and B, lines 2	2-11.		
pe	ng separately or are legally separated. Fill o nalty of perjury that you and your spouse are le ng apart for reasons that do not include evading	gally separated	d under nonba	nkruptc	y law that applie	es or that y		
101(10A). Fo the 6 months	erage monthly income that you received from all standard from the example, if you are filing on September 15, the 6-mond add the income for all 6 months and divide the total the same rental property, put the income from that property.	onth period would by 6. Fill in the re	be March 1 thro sult. Do not inclu	ough Aug ide any i	gust 31. If the amo	ount of your ore than on	monthly income ce. For example	varied during , if both
				Colur		Column Debtor non-fili		
	ss wages, salary, tips, bonuses, overtime, a eductions).	nd commission	ons (before all	\$	4,247.17	\$	0.00	
	and maintenance payments. Do not include p B is filled in.	payments from	a spouse if	\$	0.00	\$	0.00	
of you or from an u and room	nts from any source which are regularly pair your dependents, including child support. nmarried partner, members of your household, mates. Include regular contributions from a spot on the include payments you listed on line 3.	Include regular your depende	r contributions nts, parents,	\$	0.00	\$	0.00	
5. Net inco	me from operating a business, profession, o							
			otor 1					
	eipts (before all deductions)	\$ 0.00						
1	and necessary operating expenses	-\$ 0.00	Copy here ->	Φ.	0.00	\$	0.00	
	hly income from a business, profession, or farm	15 0.00	Copy nere ->	- Φ	0.00	Φ	0.00	
6. Net inco	me from rental and other real property	Deh	otor 1					
Gross red	reipts (before all deductions)	\$ 0.00						

0.00

0.00 Copy here -> \$

\$

0.00

0.00

\$

\$

-\$

\$

Ordinary and necessary operating expenses

7. Interest, dividends, and royalties

Net monthly income from rental or other real property

0.00

0.00

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Debtor 1 Debtor 2	William Joseph Ramsey Tracy Michelle Ramsey			Case number	(if known)			
				Column A Debtor 1		Column B Debtor 2 o non-filing		
8. U	employment compensation			\$	0.00	\$	0.00	
	not enter the amount if you contend that the amou Social Security Act. Instead, list it here:		efit under					
	For you	\$0	.00					
	For your spouse		.00					
be no Ui di pa do	nsion or retirement income. Do not include any a nefit under the Social Security Act. Also, except as t include any compensation, pension, pay, annuity, ited States Government in connection with a disability, or death of a member of the uniformed servicy paid under chapter 61 of title 10, then include that es not exceed the amount of retired pay to which you etired under any provision of title 10 other than chapter 10 other 10 other than chapter 10 other 10 o	stated in the next sent or allowance paid by the lity, combat-related injuices. If you received ar to pay only to the extent ou would otherwise be	ence, do ne ury or ny retired that it	\$	0.00	\$	0.00	
10. In Dere	come from all other sources not listed above. Specific not include any benefits received under the Social served as a victim of a war crime, a crime against humestic terrorism; or compensation, pension, pay, arited States Government in connection with a disability, or death of a member of the uniformed services on a separate page and put the total below.	pecify the source and a Security Act; payment umanity, or internationa nnuity, or allowance pa ility, combat-related inju	s al or iid by the ury or					
	•			\$	0.00	\$	0.00	
				\$	0.00	\$	0.00	
	Total amounts from separate pages, if any.		+	\$	0.00	\$	0.00	
	Iculate your total current monthly income. Add I ch column. Then add the total for Column A to the t		\$	4,247.17	+	0.00		,247.17 ent monthly
Part 2:	Determine Whether the Means Test Applies	to You					income	
12. C	Iculate your current monthly income for the yea	ar. Follow these steps:						
12	a. Copy your total current monthly income from line	11		Сору	line 11 h	nere=>	\$4	,247.17
	Multiply by 12 (the number of months in a year)						x 12	
12	b. The result is your annual income for this part of t	he form				12b	. \$50	,966.04
13. C	lculate the median family income that applies to	you. Follow these ste	eps:					
Fi	in the state in which you live.	VA						
Fi	in the number of people in your household.	5						
To	in the median family income for your state and size find a list of applicable median income amounts, go this form. This list may also be available at the ban	o online using the link	specified	in the separa	te instruc	13. tions	\$ <u>119</u>	,000.00
14. H	w do the lines compare?							
14	a. Line 12b is less than or equal to line 13. Go to Part 3. Do NOT fill out or file Official		heck box	1, There is n	o presum	ption of abus	e.	
14			2, The pre	esumption of	abuse is	determined b	y Form 122	A-2.
art 3:	Sign Below							
	By signing here, I declare under penalty of perjur	ry that the information of	on this sta	atement and i	n any atta	achments is tr	rue and corr	ect.
	X /s/ William Joseph Ramsey	Y	/s/ Trac	y Michelle	Ramsev	,		
	William Joseph Ramsey			lichelle Ra				
	Signature of Debtor 1			e of Debtor 2	•			

Debtor 1

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Debtor 1 Debtor 2	William Joseph Ramsey Tracy Michelle Ramsey		Case number (if known)	
Da	December 11, 2019 MM / DD / YYYY	Date	December 11, 2019 MM / DD / YYYY	
	If you checked line 14a, do NOT fill out or file Form 122A-2.			
	If you checked line 14b, fill out Form 122A-2 and file it with th	is form.		

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Debtor 1	William Joseph Ramsey		
Debtor 2	Tracy Michelle Ramsey	Case number (if known)	

Current Monthly Income Details for the Debtor

Debtor Income Details:

Income for the Period 06/01/2019 to 11/30/2019.

Line 2 - Gross wages, salary, tips, bonuses, overtime, commissions

Source of Income: **w** Year-to-Date Income:

Starting Year-to-Date Income: \$27,398.00 from check dated 5/31/2019. Ending Year-to-Date Income: \$52,881.00 from check dated 11/30/2019.

Income for six-month period (Ending-Starting): **\$25,483.00**.

Average Monthly Income: \$4,247.17.

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B2030 (Form 2030) (12/15)

United States Bankruptcy Court Western District of Virginia

In	re	William Joseph Ramse Tracy Michelle Ramse			Case No.		
			,	Debtor(s)	Chapter	7	
		DISCI OSI	HRE OF COMPE	NSATION OF ATTOR	NEV FOR DE	RTOR(S)	
	ъ						
1.	cor	npensation paid to me withi	n one year before the filin	(b), I certify that I am the attorn of of the petition in bankruptcy, of or in connection with the ban	or agreed to be paid	to me, for services rendered	l or to
		For legal services, I have				1,150.00	
		Prior to the filing of this s	tatement I have received		<u> </u>	1,150.00	
		Balance Due			\$	0.00	
2.	The	e source of the compensation	n paid to me was:				
		■ Debtor □ Otl	her (specify):				
3.	The	e source of compensation to	be paid to me is:				
		■ Debtor □ Otl	her (specify):				
4.	-	I have not agreed to share to	the above-disclosed comp	ensation with any other person	unless they are mem	pers and associates of my la	w firm.
				ation with a person or persons we mes of the people sharing in the			n. A
5.	In	return for the above-disclose	ed fee, I have agreed to re	nder legal service for all aspect	s of the bankruptcy c	ase, including:	
	b. c.	Preparation and filing of an Representation of the debto [Other provisions as needed Negotiations with reaffirmation agree	ny petition, schedules, state or at the meeting of credited d] secured creditors to r	ering advice to the debtor in detection of affairs and plan which ors and confirmation hearing, are educe to market value; exemps as needed; preparation usehold goods.	may be required; id any adjourned hea emption planning;	rings thereof;	of
6.	Ву		the debtors in any dis	e does not include the following schargeability actions, judi		es, relief from stay action	ns or
				CERTIFICATION			
this		ertify that the foregoing is a kruptcy proceeding.	complete statement of any	y agreement or arrangement for	payment to me for re	epresentation of the debtor(s	s) in
	Dec	ember 11, 2019		/s/ Donald M. Bur	ks		
	Date	•		Donald M. Burks Signature of Attorne Don Burks P.C. 30 Crossing Lane Lexington, VA 24 540 463-1080 Fa bankruptcy@don	e, Suite 205 450 x: 540 463-1082		
1				Name of law firm			ļ

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United States Bankruptcy Court Western District of Virginia

In re	Tracy Michelle Ramsey					
		Debtor(s)	Chapter	7		
	VERIFICATION OF CREDITOR MATRIX					
he abo	ove-named Debtors hereby verify t	that the attached list of creditors is true and cor	rect to the best	of their knowledge.		
Date:	December 11, 2019	/s/ William Joseph Ramsey				
		William Joseph Ramsey				
		Signature of Debtor				
Date:	December 11, 2019	/s/ Tracy Michelle Ramsey				
		Tracy Michelle Ramsey				

Signature of Debtor

William Joseph Ramsey

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Ramsey, William and Tracy -

AMERICAN FIRST FINANCE ATTN: BANKRUPTCY PO BOX 565848 DALLAS, TX 75356

ASSET RECOVERY SOLUTIONS 2200 E. DEVON AVE, STE 200 DES PLAINES, IL 60018

AUGUSTA HEALTH PO BOX 1000 FISHERVILLE, VA 22939

BERGLUND AUTOMOTIVE 1824 WILLIAMSON RD ROANOKE, VA 24012

CARILION CLINIC PO BOX 13966 ROANOKE, VA 24038-3966

CNAC - VA102 3141 PETERS CREEK RD NW ROANOKE, VA 24019

COMENITY BANK/PEEBLES ATTN: BANKRUPTCY PO BOX 182125 COLUMBUS, OH 43218

COMENITY BANK/VICTORIA SECRET ATTN: BANKRUPTCY PO BOX 182125 COLUMBUS, OH 43218

COMENITY CAPITAL/ZALES ATTN: BANKRUTPTCY DEPT PO BOX 18215 COLUMBUS, OH 43218

CONTINENTAL FINANCE CO PO BOX 8099 NEWARK, DE 19714

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Ramsey, William and Tracy -

CREDIT ONE BANK ATTN: BANKRUPTCY DEPARTMENT PO BOX 98873 LAS VEGAS, NV 89193

EASY PAY/DUVERA COLLECTIONS ATTN: BANKRUPTCY PO BOX 2549 CARLSBAD, CA 92018

FINGERHUT ATTN: BANKRUPTCY PO BOX 1250 SAINT CLOUD, MN 56395

FIRST PREMIER BANK ATTN: BANKRUPTCY PO BOX 5524 SIOUX FALLS, SD 57117

FNB OMAHA P.O. BOX 3412 OMAHA, NE 68197

GENESIS BC/CELTIC BANK ATTN: BANKRUPTCY PO BOX 4477 BEAVERTON, OR 97076

HEVENER'S CARS AND TRUCKS 785 LONGHOLLOW RD BUENA VISTA, VA 24416

JEFFERSON CAPITAL SYSTEMS, LLC PO BOX 1999 SAINT CLOUD, MN 56302

KOHLS/CAPITAL ONE ATTN: BANKRUPTCY PO BOX 30285 SALT LAKE CITY, UT 84130

LVNV FUNDING/RESURGENT CAPITAL ATTN: BANKRUPTCY PO BOX 10497 GREENVILLE, SC 29603

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Ramsey, William and Tracy -

MEDKEY
213 S JEFFERSON ST #303
ROANOKE, VA 24011

MEDKEY PO BOX 40032 ROANOKE, VA 24022

MIDLAND FUNDING
2365 NORTHSIDE DR STE 300
SAN DIEGO, CA 92108

ONEMAIN FINANCIAL ATTN: BANKRUPTCY 601 NW 2ND ST #300 EVANSVILLE, IN 47708

PORTFOLIO RECOVERY ATTN: BANKRUPTCY 120 CORPORATE BLVD NORFOLD, VA 23502

RECIVABLE MANAGEMENT SERVICES. LLC ATTN: BANKRUPTCY 240 EMERY STREET BETHLEHEM, PA 18015

RENT-A-CENTER 850 STATLER BLVD STAUNTON, VA 24401

ROANOKE CITY GDC 315 WEST CHURCH AVE SW 2ND FL ROANOKE, VA 24016

SCA CREDIT SVCS ATTN: BANKRUPTCY 1502 WILLIAMSON ROAD ROANOKE, VA 24012

SCHEWEL FURN 485 E NELSON ST LEXINGTON, VA 24450

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SHENANDOAH DERMATOLOGY 1600 N COALTER ST, STE 19 STAUNTON, VA 24401

SOUTHWEST CREDIT SYSTEMS 4120 INTERNATIONAL PARKWAY SUITE 1100 CARROLLTON, TX 75007

SYNCHRONY BANK/WALMART ATTN: BANKRUPTCY PO BOX 965060 ORLANDO, FL 32896

TELECOM SELF-REPORTED PO BOX 4500 ALLEN, TX 75013

TOTAL VISA/BANK OF MISSOURI ATTN: BANKRUPTCY PO BOX 85710 SIOUX FALLS, SD 57118

VALLEY CREDIT SERVICE, INC ATTN: BANKRUPTCY PO BOX 2162 HAGERSTOWN, MD 21742

VERIZON WIRELESS 5175 EMERALD PKWAY DUBLIN, OH 43017